

4/3/2020

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : TAXLEAF.COM INC
Account Number : 120140000884
Phone : (305)541-3980
Fax Number : (888)772-8108

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
GEA BUSINESS LLC

Certificate of Status	0
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Estimated Charge	\$25.00

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Corporate Filing Menu

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APR 07 2020

STATEMENT OF AUTHORITY

Pursuant to section 605.0302(1), Florida Statutes, this limited liability company submits the following statement of authority:

FIRST: The name of the limited liability company is: GEA BUSINESS LLC

SECOND: The Florida Document Number of the limited liability company is: L18000287102

THIRD: The street address of the limited liability company's principal office is:
21450 SAWMILL COURT BOCA RATON FL 33498

The mailing address of the limited liability company's principal office is:
21450 SAWMILL COURT BOCA RATON FL 33498

FOURTH: This statement of authority grants or sets limitations of authority on all persons having the status or position of a person in a company, whether as a member, transferee, manager, officer or otherwise or to a specific person on the following:

1. May execute an instrument transferring real property held in the name of the company.

GIOVANA DE AZEVEDO ROSA

a. Limited to: _____

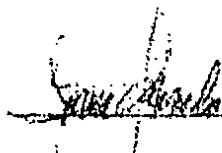
b. No authority granted to: _____

2. May enter into other transactions on behalf of, or otherwise act for or bind, the company.

GIOVANA DE AZEVEDO ROSA

a. Granted to: _____

b. No authority granted to: _____



Signature of authorized representative

ELIANA BORGES DE AZEVEDO
Typed or printed name of signature

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